

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213552768</b>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>First Tennessee Bank National Association</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX ROAD, SUITE 285</b>  <b>GLEN ALLEN, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>US</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>10/31/2013</b></p> <p>SCC ID NO: <b>F1564873</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>10,000,000</td> </tr> <tr> <td>PREFER</td> <td>5,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	10,000,000	PREFER	5,000,000
CLASS	AUTHORIZED							
COMMON	10,000,000							
PREFER	5,000,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 165 MADISON AVE 8TH FLOOR</p> <p style="text-align: center;">CITY/ST/ZIP: MEMPHIS, TN 38103</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: D BRYAN JORDAN  TITLE: PRES/CEO  ADDRESS: 165 MADISON AVE  CITY/ST/ZIP/CO: MEMPHIS, TN 38103 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: D BRYAN JORDAN TITLE: PRES/CEO ADDRESS: 165 MADISON AVE CITY/ST/ZIP/CO: MEMPHIS, TN 38103	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR	
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NAME: MICHAEL E KISBER TITLE: PRESIDENT ADDRESS: 165 MADISON AVE CITY/ST/ZIP/CO: MEMPHIS, TN 38103	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR				

NAME:	DAVID T POPWELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	SUSAN L SPRINGFIELD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	CHARLES T TUGGLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	GENERAL CNSL		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	YOUSEF A VALINE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	ROBERT B CARTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	JOHN C COMPTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	MARK A EMKES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	CORYDON J GILCHRIST	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	VICKY B GREGG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	R BRAD MARTIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		
NAME:	SCOTT M NISWONGER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	165 MADISON AVE		
CITY/ST/ZIP/CO:	MEMPHIS, TN 38103		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICKI R PALMER DIRECTOR 165 MADISON AVE MEMPHIS, TN 38103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	COLIN V REED DIRECTOR 165 MADISON AVE MEMPHIS, TN 38103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LUKE YANCY, III DIRECTOR 165 MADISON AVE MEMPHIS, TN 38103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ CLYDE A BILLINGS, JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CLYDE A BILLINGS, JR, SVP/CORP/SEC PRINTED NAME AND CORPORATE TITLE	10/31/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			